

New strategies for managing bowel and bladder dysfunction after spinal cord injury

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Among the many challenges to independence and quality of life after spinal cord injury, two complications have emerged as top priorities for researchers—neurogenic bowel and neurogenic bladder. With funding from the Craig H. Neilsen Foundation, researchers formulated a framework for planning and executing the research needed in these areas, and established recommendations for translating research findings into practical recommendations for community use by individuals with spinal cord injury.

The development of metric standards was fundamental to their objectives, which included updating clinical recommendations for clinicians and consumers, understanding bowel physiology and establishing targets for therapeutic intervention, utilizing sensory technology to signal the need to void, optimizing neuromodulation to replace or restore functional control, and measuring the associations between diet and activity on bowel and <u>bladder function</u>.

The March issue of the *Journal of Spinal Cord Medicine* features this Open Access content: a commentary and two articles describing the bowel and bladder evaluation strategies that can be applied to the continuum of preclinical and <u>clinical research</u> and implementation in the community. In "Recommendations for evaluation of bladder and bowel function in preclinical spinal cord injury research," Holmes and associates focus on the appropriateness of various outcome metrics in the study of neurogenic bowel and <u>bladder dysfunction</u>, emphasizing metrics fundamental to the development of effective interventions.



For the next step on the continuum, in "Recommendations for evaluation of neurogenic bladder and bowel dysfunction after spinal cord injury and/or disease," Tate and colleagues rigorously assess the use of clinical tools and metrics in clinical trials. They recommend 15 clinical assessments for bladder dysfunction and 12 objective assessments of bowel dysfunction and identify eight measures for the self-report of bladder and bowel dysfunction.

In the accompanying commentary, "Neurogenic bowel and bladder evaluation strategies in spinal cord injury: New directions," David R. Gater, Jr., MD, Ph.D., MS, advises preclinical and clinical researchers, "...to take heed of these recommendations as they consider methodology for their studies and trials in neurogenic bladder and bowel, recognizing the importance of solid methodology to the development of clinical interventions that will enable people with disabilities to participate fully in their communities."

More information: Denise G. Tate et al, Recommendations for evaluation of neurogenic bladder and bowel dysfunction after spinal cord injury and/or disease, *The Journal of Spinal Cord Medicine* (2020). DOI: 10.1080/10790268.2019.1706033

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